

# BEST AVAILABLE COPY

MAY-25-2006 16:46 FROM: BSTZ

7145573347

TO: USPTO

RECEIVED  
CENTRAL FAX CENTER

MAY 25 2006

## BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW  
12400 WILSHIRE BOULEVARD, 7TH FLOOR  
LOS ANGELES, CA 90025

FACSIMILE: (714) 557-3347

### FACSIMILE COVER SHEET

Deliver to: Michael J. Hicks, USPTO

Art Group: 2165

Facsimile No.: 703-872-9306

Date: May 25, 2006

From: William W. Schaal, Reg. No. 39,018

Our Docket No.: 80398P458

Number of pages 12 including this sheet.

Application No.: 09/844,161

Filing Date: 4/27/2001

Docket Due Date(s): 5/25/2006

Enclosed are the following documents:

- Amendment: After Final ( 8 pgs)
- Appeal Brief (        pgs)
- Application:        (        pgs) w/cover & abstract)
- Assignment & Cover Sheet (        pgs)
- Certificate of Facsimile
- Continued Prosecution Application (CPA)
- Declaration & POA (        pgs)
- Drawings:        sheets,        figures
- Extension of Time:        - - -
- Fee Transmittal (in duplicate)
- IDS & PTO/SB/08 (        pgs)
- Other:        - - -

- Issue Fee Transmittal
- Notice of Appeal
- Petition for:
- Request for Continued Examination (RCE)
- Reply Brief (        pgs)
- Request & Certification Under 35 USC 122(b)(2)(B)(i)
- Request to Rescind Previous Nonpublication Request
- Response to Notice of Missing Parts & Formalities Letter
- Response to Written Opinion (        pgs)
- Terminal Disclaimer
- Transmittal of Publication Fee Due
- Transmittal Letter

### CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

  
Susan McFarlane 5/25/2006  
Date

**Confidentiality Note:** The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

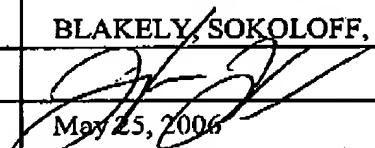
If you do not receive all the pages, or if there is any difficulty in receiving, please call: (714) 557-3800 and ask for Susan McFarlane.

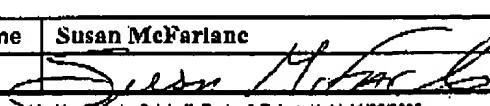
RECEIVED  
CENTRAL FAX CENTER

MAY 25 2006

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/844,161
		Filing Date	April 27, 2001
		First Named Inventor	J. Chris Russell
		Art Unit	2165
		Examiner Name	Michael J. Hicks
Total Number of Pages in This Submission	11	Attorney Docket Number	80398P458

<b>ENCLOSURES (check all that apply)</b>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks		

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 <b>BLAKELY, SOKOLOFF, TAYLOR &amp; ZAFMAN LLP</b>
Signature	
Date	May 25, 2006

<b>CERTIFICATE OF MAILING/TRANSMISSION</b>			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan McFarlane		
Signature		Date	May 25, 2006

Based on PTO/SR/21 (11-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 11/30/2003.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

RECEIVED  
CENTRAL FAX CENTER

MAY 25 2006

# **FEE TRANSMITTAL for FY 2005**

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

**TOTAL AMOUNT OF PAYMENT** (\$ 0.00)

<i>Complete if Known</i>	
Application Number	09/844,161
Filing Date	April 27, 2001
First Named Inventor	J. Chris Russell
Examiner Name	Michael J. Hicks
Art. Unit	2165
Attorney Docket No.	80398P458

**METHOD OF PAYMENT (check all that apply)**

Check  Credit card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below       Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayment of fee(s)       Credit any overpayments  
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

## **FEES CALCULATION**

## 1. EXTRA CLAIM FEES

Total Claims	17	20*	Claims below	Fee Paid
Independent Claims	3	5*	0 x 50.00	\$0.00
Multiple Dependent			0 x 200.00	\$0.00

Large Entity		Small Entity		Fee Description
Fee	Fee	Fee	Fee	
Code	(5)	Code	(5)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	100	Multiple Dependent claim, if not paid
1204	780	2204	385	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent

<sup>\*\*</sup>or number previously paid, if greater. For Reissues, see below.

## 2. ADDITIONAL FEES

## 2 ADDITIONAL FEES

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1031	130	2051	85	Surcharge - late filing fee or oath
1042	50	2052	25	Surcharge - late provisional filing fee or cover sheet.
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	610	Extension for reply within third month
1254	1,500	2254	785	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to Institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	60	1807	50	Processing fee under 37 CFR 1.17(d)
1805	180	1806	180	Submission of Information Disclosure Stmt
1809	700	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	700	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))

**Fee Paid**

**SUBMITTED BY**

**Complete (if applicable)**

Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800
Signature				Date	05/25/06

Based on PTO/SB/17 (12-44) as modified by Berkley, Sokoloff, Taylor & Zafman (mr) 12/15/2004  
SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

RECEIVED  
CENTRAL FAX CENTER

MAY 25 2006

<b>FEE TRANSMITTAL for FY 2005</b>		<i>Complete if Known</i>																																																																																									
Patent fees are subject to annual revision.		Application Number	09/844,161																																																																																								
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	April 27, 2001																																																																																								
TOTAL AMOUNT OF PAYMENT (\$)		Examiner Name	J. Chris Russell																																																																																								
0.00		Art Unit	Michael J. Hicks																																																																																								
		Attorney Docket No.	2165 80398P458																																																																																								
<b>METHOD OF PAYMENT (check all that apply)</b>																																																																																											
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____																																																																																											
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor &amp; Zafman LLP</u>																																																																																											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)																																																																																											
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee																																																																																											
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) <input type="checkbox"/> Credit any overpayments																																																																																											
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.																																																																																											
<b>FEE CALCULATION</b>																																																																																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">1. EXTRA CLAIM FEES</td> <td style="text-align: center;">Extra Claims</td> <td style="text-align: center;">Fee from below</td> <td style="text-align: center;">Fee Paid</td> </tr> <tr> <td>Total Claims</td> <td>17</td> <td>20* = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td></tr></table> x <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>50.00</td></tr></table> = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>\$0.00</td></tr></table></td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>5* = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td></tr></table> x <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>200.00</td></tr></table> = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>\$0.00</td></tr></table></td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Large Entity</td> <td>Small Entity</td> <td></td> <td></td> </tr> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> <td>Fee Description</td> <td></td> </tr> <tr> <td>1202 50</td> <td>2202 25</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201 200</td> <td>2201 100</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203 360</td> <td>2203 180</td> <td>Multiple Dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204 790</td> <td>2204 395</td> <td>**Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205 300</td> <td>2205 150</td> <td>**Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (1)</td> <td style="text-align: right;">(\$)</td> <td style="text-align: right;">0.00</td> </tr> </table>				1. EXTRA CLAIM FEES		Extra Claims	Fee from below	Fee Paid	Total Claims	17	20* = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td></tr></table> x <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>50.00</td></tr></table> = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>\$0.00</td></tr></table>	0	50.00	\$0.00		Independent Claims	3	5* = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td></tr></table> x <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>200.00</td></tr></table> = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>\$0.00</td></tr></table>	0	200.00	\$0.00		Multiple Dependent				Large Entity	Small Entity			Fee Code (\$)	Fee Code (\$)	Fee Description		1202 50	2202 25	Claims in excess of 20		1201 200	2201 100	Independent claims in excess of 3		1203 360	2203 180	Multiple Dependent claim, if not paid		1204 790	2204 395	**Reissue independent claims over original patent		1205 300	2205 150	**Reissue claims in excess of 20 and over original patent		SUBTOTAL (1)		(\$)	0.00																																	
1. EXTRA CLAIM FEES		Extra Claims	Fee from below	Fee Paid																																																																																							
Total Claims	17	20* = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td></tr></table> x <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>50.00</td></tr></table> = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>\$0.00</td></tr></table>	0	50.00	\$0.00																																																																																						
0																																																																																											
50.00																																																																																											
\$0.00																																																																																											
Independent Claims	3	5* = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td></tr></table> x <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>200.00</td></tr></table> = <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>\$0.00</td></tr></table>	0	200.00	\$0.00																																																																																						
0																																																																																											
200.00																																																																																											
\$0.00																																																																																											
Multiple Dependent																																																																																											
Large Entity	Small Entity																																																																																										
Fee Code (\$)	Fee Code (\$)	Fee Description																																																																																									
1202 50	2202 25	Claims in excess of 20																																																																																									
1201 200	2201 100	Independent claims in excess of 3																																																																																									
1203 360	2203 180	Multiple Dependent claim, if not paid																																																																																									
1204 790	2204 395	**Reissue independent claims over original patent																																																																																									
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent																																																																																									
SUBTOTAL (1)		(\$)	0.00																																																																																								
*or number previously paid, if greater. For Reissues, see below																																																																																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">2. ADDITIONAL FEES</td> <td style="text-align: center;">Fee Description</td> <td style="text-align: center;">Fee Paid</td> </tr> <tr> <td>Large Entity</td> <td>Small Entity</td> <td></td> <td></td> </tr> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> <td>Fee Description</td> <td></td> </tr> <tr> <td>1651 130</td> <td>2051 65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1652 50</td> <td>2052 25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>2053 130</td> <td>2053 130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1251 120</td> <td>2251 60</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252 450</td> <td>2252 225</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253 1,020</td> <td>2253 510</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254 1,690</td> <td>2254 795</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255 2,160</td> <td>2255 1,080</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401 500</td> <td>2401 250</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402 500</td> <td>2402 250</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403 1,000</td> <td>2403 500</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451 1,810</td> <td>2451 1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1460 130</td> <td>2460 130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>1607 60</td> <td>1807 50</td> <td>Processing fee under 37 CFR 1.17(q)</td> <td></td> </tr> <tr> <td>1800 180</td> <td>1808 180</td> <td>Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>1810 790</td> <td>1809 395</td> <td>Filing a submission after final rejection (37 CFR § 1.120(a))</td> <td></td> </tr> <tr> <td>1810 790</td> <td>2810 395</td> <td>For each additional invention to be examined (37 CFR § 1.120(b))</td> <td></td> </tr> <tr> <td colspan="2">Other fee (specify)</td> <td></td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (2)</td> <td style="text-align: right;">(\$)</td> <td></td> </tr> </table>				2. ADDITIONAL FEES		Fee Description	Fee Paid	Large Entity	Small Entity			Fee Code (\$)	Fee Code (\$)	Fee Description		1651 130	2051 65	Surcharge - late filing fee or oath		1652 50	2052 25	Surcharge - late provisional filing fee or cover sheet		2053 130	2053 130	Non-English specification		1251 120	2251 60	Extension for reply within first month		1252 450	2252 225	Extension for reply within second month		1253 1,020	2253 510	Extension for reply within third month		1254 1,690	2254 795	Extension for reply within fourth month		1255 2,160	2255 1,080	Extension for reply within fifth month		1401 500	2401 250	Notice of Appeal		1402 500	2402 250	Filing a brief in support of an appeal		1403 1,000	2403 500	Request for oral hearing		1451 1,810	2451 1,510	Petition to institute a public use proceeding		1460 130	2460 130	Petitions to the Commissioner		1607 60	1807 50	Processing fee under 37 CFR 1.17(q)		1800 180	1808 180	Submission of Information Disclosure Stmt		1810 790	1809 395	Filing a submission after final rejection (37 CFR § 1.120(a))		1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.120(b))		Other fee (specify)				SUBTOTAL (2)		(\$)	
2. ADDITIONAL FEES		Fee Description	Fee Paid																																																																																								
Large Entity	Small Entity																																																																																										
Fee Code (\$)	Fee Code (\$)	Fee Description																																																																																									
1651 130	2051 65	Surcharge - late filing fee or oath																																																																																									
1652 50	2052 25	Surcharge - late provisional filing fee or cover sheet																																																																																									
2053 130	2053 130	Non-English specification																																																																																									
1251 120	2251 60	Extension for reply within first month																																																																																									
1252 450	2252 225	Extension for reply within second month																																																																																									
1253 1,020	2253 510	Extension for reply within third month																																																																																									
1254 1,690	2254 795	Extension for reply within fourth month																																																																																									
1255 2,160	2255 1,080	Extension for reply within fifth month																																																																																									
1401 500	2401 250	Notice of Appeal																																																																																									
1402 500	2402 250	Filing a brief in support of an appeal																																																																																									
1403 1,000	2403 500	Request for oral hearing																																																																																									
1451 1,810	2451 1,510	Petition to institute a public use proceeding																																																																																									
1460 130	2460 130	Petitions to the Commissioner																																																																																									
1607 60	1807 50	Processing fee under 37 CFR 1.17(q)																																																																																									
1800 180	1808 180	Submission of Information Disclosure Stmt																																																																																									
1810 790	1809 395	Filing a submission after final rejection (37 CFR § 1.120(a))																																																																																									
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.120(b))																																																																																									
Other fee (specify)																																																																																											
SUBTOTAL (2)		(\$)																																																																																									

SUBMITTED BY						Complete (if applicable)	
Name (Print/Type)	<u>William W. Schaeff</u>		Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800	
Signature					Date	05/25/06	

Based on PTO/SB/17 (12-14) as modified by Blakely, Sokoloff, Taylor & Zafman (W) 12/16/2004.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 09/844,161  
Amtd. Dated 05/25/2006  
Reply to Final Office Action of March 30, 2006

**RESPONSE UNDER 37 C.F.R. 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 2165**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application. No.	:	09/844,161	Confirmation No. 1783
Applicant	:	J. Chris Russell	
Filed	:	04/27/2001	
TC/A.U.	:	2165	
Examiner	:	Michael J. Hicks	
Docket No.	:	80398P458	
Customer No.	:	8791	

Mail Stop AF  
Commissioner for Patents  
PO Box 1450  
Alexandria VA 22313-1450

**AMENDMENT AND RESPONSE UNDER 37 CFR §1.116**

Sir:

In response to the Office Action of March 30, 2006, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 4 of this paper.

Remarks begin on page 9 of this paper.

An Appendix including amended drawing figures is attached following page 12 of this paper.